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Application Number	10/798,932
Filing Date	03/11/2004
First Named Inventor	Muirhead, Scott
Art Unit	3637
Examiner Name	Chen, Jose
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number:

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Scott Muirhead		
Date	March 29, 2005	Telephone	604 841-8762

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of **4** forms are submitted.

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